Segment means a group of related data elements in a transaction.

Stage 1 payment initiation means a health plan's order, instruction or authorization to its financial institution to make a health care claims payment using an electronic funds transfer (EFT) through the ACH Network.

Standard transaction means a transaction that complies with an applicable standard and associated operating rules adopted under this part.

Subhealth plan (SHP) means a health plan whose business activities, actions, or policies are directed by a controlling health plan.

[65 FR 50367, Aug. 17, 2000, as amended at 68 FR 8374, Feb. 20, 2003; 74 FR 3324, Jan. 16, 2009; 76 FR 40495, July 8, 2011; 77 FR 1589, Jan. 10, 2012; 77 FR 54719, Sept. 5, 2012]

Subparts B-C [Reserved]

Subpart D—Standard Unique Health Identifier for Health Care Providers

Source: 69 FR 3468, Jan. 23, 2004, unless otherwise noted.

§162.402 [Reserved]

\$162.404 Compliance dates of the implementation of the standard unique health identifier for health care providers.

- (a) Health care providers. A covered health care provider must comply with the implementation specifications in §162.410 no later than May 23, 2007.
- (b) *Health plans*. A health plan must comply with the implementation specifications in §162.412 no later than one of the following dates:
- (1) A health plan that is not a small health plan—May 23, 2007.
- (2) A small health plan—May 23, 2008.
- (c) Health care clearinghouses. A health care clearinghouse must comply with the implementation specifications in §162.414 no later than May 23, 2007.

[69 FR 3468, Jan. 23, 2004, as amended at 77 FR 54719, Sept. 5, 2012]

§ 162.406 Standard unique health identifier for health care providers.

(a) Standard. The standard unique health identifier for health care pro-

viders is the National Provider Identifier (NPI). The NPI is a 10-position numeric identifier, with a check digit in the 10th position, and no intelligence about the health care provider in the number.

- (b) Required and permitted uses for the NPI. (1) The NPI must be used as stated in §162.410, §162.412, and §162.414.
- (2) The NPI may be used for any other lawful purpose.

§162.408 National Provider System.

National Provider System. The National Provider System (NPS) shall do the following:

- (a) Assign a single, unique NPI to a health care provider, provided that—
- (1) The NPS may assign an NPI to a subpart of a health care provider in accordance with paragraph (g); and
- (2) The Secretary has sufficient information to permit the assignment to be made.
- (b) Collect and maintain information about each health care provider that has been assigned an NPI and perform tasks necessary to update that information.
- (c) If appropriate, deactivate an NPI upon receipt of appropriate information concerning the dissolution of the health care provider that is an organization, the death of the health care provider who is an individual, or other circumstances justifying deactivation.
- (d) If appropriate, reactivate a deactivated NPI upon receipt of appropriate information.
- (e) Not assign a deactivated NPI to any other health care provider.
- (f) Disseminate NPS information upon approved requests.
- (g) Assign an NPI to a subpart of a health care provider on request if the identifying data for the subpart are unique.

§ 162.410 Implementation specifications: Health care providers.

- (a) A covered entity that is a covered health care provider must:
- (1) Obtain, by application if necessary, an NPI from the National Provider System (NPS) for itself or for any subpart of the covered entity that would be a covered health care provider if it were a separate legal entity. A covered entity may obtain an NPI for